

DEPARTMENT OF THE NAVY

BUREAU OF MEDICINE AND SURGERY 2300 E STREET NW WASHINGTON DC 20372-5300

BUMEDINST 5420.13C BUMED-M005C 27 Apr 2009

BUMED INSTRUCTION 5420.13C

From: Chief, Bureau of Medicine and Surgery

To: Ships and Stations Having Medical Department Personnel

Subj: ENLISTED TECHNICAL LEADER (ETL) PROGRAM

Encl: (1) Bureau of Medicine and Surgery, Mission and Functions of Medical Department Enlisted Technical Leaders

- (2) Enlisted Technical Leader Selection Criteria and Processes
- (3) Sample Quarterly Report
- (4) Sample Curriculum Vitae
- (5) Acronyms
- 1. <u>Purpose</u>. To provide guidelines for the mission, function, selection criteria, and responsibilities for the Medical Department ETL program. This is a complete revision and must be read in its entirety.
- 2. Cancellation. BUMEDINST 5420.13B.
- 3. <u>Background</u>. Experienced enlisted personnel often assist upper echelon management with their technical expertise. Experts in each Navy Enlisted Classification (NEC) play a vital role in strategic planning and provide deckplate information required for resolving issues and implementing appropriate policy. To harness this pool of talent, and to ensure that the enlisted perspective is represented, the Bureau of Medicine and Surgery (BUMED) has developed and implemented the ETL Program.
- 4. <u>Status and Command Relationships</u>. The ETL is an advisory position only and is not intended to dilute primary, legal, or regulatory responsibilities of the Navy's command structure. ETLs receive direction from and report to the Chief, BUMED via the Director, Hospital Corps (BUMED-M005C). They must also work in concert with the specialty leaders representing corresponding officer medical specialties. The ETLs are highly encouraged to deal directly with service members in their NEC and any other authority outside their normal chain of command on issues pertaining to their field; however, ETLs shall keep their commanding officers apprised of their activities.
- 5. Scope of Authority. Within statutory, regulatory, or policy constraints, the Chief, BUMED through the Director, Hospital Corps delegates the necessary authority to the ETLs to accomplish their mission. This authority is limited to providing advice and recommendations on enlisted technical, career, and training matters within their respective NECs to decision-making entities within the Navy. Such decision-making entities include, but are not limited to BUMED, Navy Personnel Command (PERS), Headquarters, U.S. Marine Corps, Interservice Training

Review Organization (ITRO), the Defense Medical Standardization Board, ad hoc policy formulation or execution work groups, and other higher echelon commands as necessary and related to function. Relative to this authority is access to information and direct liaison with commands and offices involved.

6. Responsibilities

a. <u>Director</u>, Hospital Corps, BUMED-M005C shall:

- (1) Designate and appoint, in writing, an ETL for each NEC within the Medical Department.
- (2) Provide direction, monitor and periodically update the ETL mission and function as required.
- (3) Inform the appropriate commanding officer of an ETL's exceptional performance for personal award and performance evaluation considerations.
 - (4) Maintain and publish a quarterly ETL directory.
- b. Navy Medicine, Manpower, Personnel, Training, and Education (NAVMED MPT&E). Provide at least one subject matter expert (SME) for each NEC at the learning center/program schoolhouse. This SME shall be an instructor with technical expertise that can assist the ETL in obtaining information about the curriculum or student population, as needed.

c. Commanding Officers and Officers in Charge shall:

- (1) Provide command endorsement on ETL nomination packages. Endorsement should include a statement on the member's ability to communicate in both oral and written form, compliance with Navy physical readiness standards, and potential as an ETL.
- (2) Provide necessary travel funds to ETLs assigned to their commands. Travel requirements may involve participation in working groups, attendance at conferences, and site visits to training facilities and constituent areas of concentration.
- (3) Provide administrative support to the ETL. This support includes access to commercial, long-distance, and Defense Switchboard Network (DSN) telephone, copier, voicemail, printing and postage capabilities, a personal computer, and other administrative requirements as needed.
- (4) Notify the Director, Hospital Corps if an ETL appointment warrants termination or if support is withdrawn for reasons deemed detrimental to the program or the command.

d. <u>Technical Leaders</u>

- (1) Accomplish the mission and functions outlined in enclosure (1) and maintain the qualification criteria shown in enclosure (2).
- (2) Submit quarterly summary reports of activities to the Director of the Hospital Corps following the format in enclosure (3). Provide a copy of the summary report to the commanding officer as well as the appropriate specialty leader. Submit all reports via e-mail; however, if e-mail is not available, then traditional mail or facsimile is appropriate.
 - (3) Maintain current curriculum vitae per enclosure (4).
 - (4) Maintain an updated list of SMEs within the NEC.
- (5) Ensure SME is providing adequate and timely support for assigned projects and workgroups.
- (6) Keep the Director, Hospital Corps fully appraised of all cases with a technical field that have impact on the hospital corps. In most cases, communication will be made through the hospital corps planners; however, in emergent cases where the planners or the Deputy Director, Hospital Corps are unavailable, direct liaison with the Director, Hospital Corps is authorized.
- (7) Maintain all related files for record keeping purposes. Each ETL shall maintain a turnover binder with standard operating procedures for the succeeding ETL. This is to ensure continuity and health of the program.
- (8) ETLs are highly encouraged to attend the annual Hospital Corps Manning Conference held in Millington, TN. This will provide the ETL with an overview of Navy Medicine as well as the opportunity to meet with the detailers, enlisted community managers, hospital corps placement coordinators, and other ETLs.
- (9) Establish and maintain the Navy Knowledge Online Web page for the community. This webpage will be utilized to communicate and disseminate information pertaining to the community of practice. This role may be delegated to an SME; however, ultimate responsibility for the webpage will remain with the ETL.

e. Subject Matter Experts (SMEs)

(1) SMEs are seasoned personnel who hold the NEC that can be called upon for additional advice and perspective when needed. SMEs are not appointed by the Director, Hospital Corps and will be used only as needed. Any funding requirements for personnel designated as an SME will be provided by the organization who is requesting SME input.

- (2) SMEs shall maintain regular contact with the ETL while working in that capacity. Once the work group that the SME is attending is complete, the SME shall provide a written summary of the work group's activity and outcome to the ETL within 5 working days.
- 7. Acronyms. An acronyms listing is provided in enclosure (5).
- 8. <u>Report</u>. The quarterly summary reports required by paragraph 6d(2) are assigned report control symbol OPNAV 5420-12. This reporting requirement approval is for 3 years from the date of this instruction.

A. M. ROBINSON, JR.

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BUREAU OF MEDICINE AND SURGERY (BUMED) MISSION AND FUNCTIONS OF MEDICAL DEPARTMENT ENLISTED TECHNICAL LEADERS (ETL)

- 1. <u>Mission</u>. The mission of the ETL program is to provide technical advice to Chief, Bureau of Medicine and Surgery via the Director, Hospital Corps (BUMED-M005C), on matters relating to particular medical and dental NECs.
- 2. <u>Functions</u>. The ETL, under the direction of BUMED shall:
 - a. Act as the focal point and advocate for constituents within the NEC represented.
 - b. Provide representation for the NEC in professional forums.
 - c. Provide advice regarding NEC specific proposals, projects, and programs.
 - d. Provide advice regarding education and training issues.
- e. Act as the primary liaison between the SME and BUMED as well as other agency inquiries.
- f. Maintain a forum for sending and exchanging information within the community they represent.
 - g. Act as a conduit for communications between the community and BUMED.
- h. Coordinate with the appropriate specialty leaders in handling issues and projects that affect policy or the administration of the NEC.
- i. Recommend changes for consideration to the billet file, Catalog of Navy Training Courses (CANTRAC), and NEC Manual as needed.

ENLISTED TECHNICAL LEADER SELECTION CRITERIA AND PROCESSES

1. <u>General</u>. Typically, one technical leader shall be appointed for each NEC. In the case of an advanced and basic field for the same NEC, the ETL shall be selected from the advanced NEC unless waived in writing by the Director, Hospital Corps.

2. Criteria. ETLs shall:

- a. Be in paygrades E-5 through E-8 with broad experiences in their respective NEC.
- b. Be assigned primary duties requiring active practice in their assigned NEC.
- c. Possess current certification or registration, if required, for the NEC.
- d. Be assigned within the continental 48 states. Shore duty is preferred; however, a written waiver may be obtained if the situation is warranted. All waivers must be approved and signed by the Director, Hospital Corps.
- e. Have no record of non-judicial punishment, courts-martial, or civilian convictions for the past 6 years.
 - f. Maintain physical readiness standards per OPNAVINST 6110.1H.
- 3. <u>Length of Term</u>. ETLs are generally appointed for a 3 year term or until their projected rotation date, end of obligated service, or they are deployed and are unable to serve in the capacity of ETL. A 1 year extension may be granted if requested by the individual and endorsed by the service member's commanding officer to whom assigned during the extended period.
- 4. <u>Termination of Appointment</u>. An appointment may be terminated before term expiration for the following reasons:
 - a. Failure to maintain any of the above stated selection criteria.
- b. Receipt of Permanent Change of Station (PCS) orders to a ship, mobile unit, or facility, currently outside continental United States (OCONUS).
- c. Reassignment to a billet requiring performance of primary duties outside the NEC or technical field.
 - d. Six months before discharge, PCS, transfer to the Fleet Reserve, or promotion to E-9.

- e. Any other reason that detracts from the incumbent's satisfactory performance of ETL duties, such as a lack of active interest, personal difficulties, other additional or collateral duties, protracted absences due to temporary additional duty, training, hospitalization, etc., or withdrawal of command support. Reasons for voluntary or involuntary termination of duty shall be validated by the member's commanding officer or the hospital corps planner/action officer before the Director, Hospital Corps makes final determinations.
- 5. <u>Application</u>. Submit an application letter to the Director, Hospital Corps via the local commanding officer. A copy of the application letter should be sent to the specialty leader for the corresponding community if applicable. A curriculum vitae based on information in enclosure (4) shall be enclosed with the application package. If the applicant is applying for a currently filled position, forward a copy of the application packages to the incumbent for endorsement.
- 6. <u>Successors</u>. At least 6 months prior to the expiration of the incumbents' term, ETLs shall submit no more than three qualified successor nominations to the Director, Hospital Corps via the appropriate specialty leader(s). The list shall be ranked in order of preference, and current curriculum vitae shall accompany each nomination.
- 7. <u>Selection</u>. The Director, Hospital Corps will make the selection and issue the appropriate appointment letters. Copies of the appointment letter shall be forwarded to the ETLs commanding officer and the appropriate specialty leader(s).

SAMPLE QUARTERLY REPORT

From: To:		CA 92055 Chief, Bureau of Medicine and Surgery (BUMED-M005C), 2300 E Street NW, Washington, DC 20372-5300			
Subj:		SUMMARY REPORT OF ACTIVITIES FOR JANUARY TO MARCH 2009			
Ref:		(a) BUMEDINST 5420.13C			
1:	Per	reference (a), I submit the following:			
	a.	i. Issues:			
	(1) Issue 1.				
		(2) Issue 2.			
	(3) Issue 3.				
		(4) Issue 4.			
	(5) Current pipeline inventory for the Community: 33 in pipeline.				
		(6) HMs XXXX: # Billets Authorized: 46			
		HMs XXXX: # Billets A	Inventory: 29 Manning Percent: 63 Authorized: 118 Inventory: 52 Manning Percent: 44		
	b.	Contacts made:			
	c.	Seminars, conferences, and meetings:			
		(1) Seminars.			
		(2) Conferences.			
		(3) Meetings.			

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Subj: SUMMARY REPORT OF ACTIVITIES FOR JANUARY TO MARCH 2009

2. Future plans and pending actions to be taken by the ETL or the knowledge managers. This area should also include who the action officer is for a particular issue. If there is an instruction or proposal which has been sent up the chain of command, please include which command it is currently with and who the point of contact is at that command.

I. M. ROBOCHIEF

Copy to: Commanding Officer

SAMPLE CURRICULUM VITAE

CONTACT INFORMATION

HMC(SW/FMF/AW/SS/DV/PJ) Eye M. Robochief

Command address:

Command telephone:

Military e-mail information:

U.S. NAVY EMPLOYMENT HISTORY

Present. Senior Enlisted Leader (SEL) Nursing Services, National Naval Medical Center, Bethesda, MD.

August 2006 - February 2007. Deployed to Afghanistan as an IA, in direct support of OEF.

July 2004 – August 2006. SEL, US Forces Iraq.

May 2001 – June 2004. Physical Therapy Technician, USS NEVERDOCK.

April 1998 - April 2001. Physical Therapy Technician, USNH Yokosuka, Japan.

July 1994 – March 1998. Physical Therapy Technician, 1ST FSSG, Camp Pendleton.

July 1991 – August 1993. General Duty Corpsman, USS ALWAYSOUT.

November 1990 – June 1991. Deployed with 2ND Battalion, 5th Marines, OPERATION DESERT STORM/DESERT SHIELD.

December 1989 - November 1990. General Duty Corpsman, Naval Hospital Philadelphia.

PROFESSIONAL QUALIFICATIONS

May 2005. Executive Medical Department Enlisted Course, Bethesda, MD.

December 2002. Earned Enlisted Aviation Warfare Specialist Insignia.

December 1997. Command Training Team course.

January 1994 - May 1994. Physical Therapy Technician "C" School.

16 July 1992. Earned Enlisted Surface Warfare Specialist Insignia.

11 June 1991. Earned Fleet Marine Force ribbon.

November 1989 - December 1989. Field Medical Service School.

July 1989 - October 1989. Hospital Corpsman "A" School, NSHS San Diego, CA.

NECs

October 2006-90N1 IA GWOT

June 1994 – (8466) Physical Therapy Technician

December 1989 - (8404) Field Medical Service School

October 1989 – (0000) Hospital Corpsman "A" School

AWARDS

Navy Cross (1)

Bronze Star (3)

Joint Service Commendation Medal (5)

Navy and Marine Corps Commendation Medal (5)

Navy and Marine Corps Achievement Medal (10)

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NAME:

HMC(SW/FMF/AW/SS/DV/PJ) Eye M. Robochief

AWARDS (Continued)

Combat Action Ribbon (7) Good Conduct Medal (2) Southwest Asia Service Medal GWOT Expeditionary Medal GWOT Service Medal NATO Medal Kuwait Liberation Medal Afghanistan Campaign Medal

SIGNIFICANT CONTRIBUTIONS TO THE TECHNICAL COMMUNITY

Please include only achievements which have directly impacted the community. Achievements must be verifiable.

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ACRONYMS

BUMED Bureau of Medicine and Surgery

CANTRAC Catalog of Navy Training Courses

DSN Defense Switchboard Network

ETL Enlisted Technical Leader

ITRO Interservice Training Review Organization

MPT&E Manpower, Personnel, Training and Education

NAVMED Navy Medicine

NEC Navy Enlisted Classification

NKO Navy Knowledge Online

NM Navy Medicine

OCONUS Outside Continental United States

PCS Permanent Change of Station

PERS Navy Personnel Command

SEL Senior Enlisted Leader

SME Subject Matter Expert